

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

MAIL STOP AMENDMENT

In re Patent Application of

Kurt Plotz

Application No.: 10/619,609

Filing Date:

July 16, 2003

Title: WALL AND FLOOR COVERINGS

Group Art Unit: 1771

Examiner: NORCA LIZ TORRES VELAZQUEZ

Confirmation No.: 6540

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

S	i	r	:
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Enc	losed is a reply for the above-identified patent application.						
×	A Petition for Extension of Time is also enclosed.						
	Terminal Disclaimer(s) and the \$\ \Bigsig \\$55.00 (2814) \ \Bigsig \\$110.00 (1814) fee per Disclaimer due under 37 C.F.R. \§ 1.20(d) are also enclosed.						
	Also enclosed is/are						
	Small entity status is hereby claimed.						
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).						
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.						
	Applicant(s) previously submitted						
	on, for which continued examination is requested.						
	Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.						
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.						



Attorney Docket No. 032745-037

Application No. __10/619,609

X	No additional claim fee is required.	

An additional claim fee is required, and is calculated :	as shown below.
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		A	MEN	DE	ED CLAIMS		
	No. of Claims	Highe of Cla Previo Paid	aims ously	•	Extra Claims	Rate	Additional Fee
Total Claims	17	MINUS	20	=	0	x \$18.00 (1202) =	\$ 0.00
Independent Claims	2	MINUS	3	=	0	x \$88.00 (1201) =	\$ 0.00
If Amendment adds n	nultiple depen	dent claim	ns, add	d \$	300.00 (1203)		
Total Claim Amendment Fee			\$ 0.00				
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee			\$ 0.00				
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT			\$ 0.00				

A check in the amount	of	is enclosed for the fee due
Charge	to Deposit Acc	ount No. 02-4800.
Charge	to credit card.	Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: December 1, 2004

Ву

George F. Lesmes

Registration No. 19,995